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maintenance fee notifica	tions.	—————	a) specifying a new conte	spondence address; a	anwor (o) indicating a sep	arate "FEE ADDRESS" for
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PATENT GROUP 2N JONES DAY NORTH POINT 901 LAKESIDE AVENUE				Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
CLEVELAND, OH 44114				(Depositor's name)		
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APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.	
10/750,699	01/02/2004		Michael H. Jette		766726610065(004)	3829
TITLE OF INVENTION: FIBER TO THE HOME BROADBAND HOME UNIT						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE I	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	МО	\$1400	\$300	\$0	\$1700	09/04/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS]		
LEUNG, CH		2613	398-070000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the same of principle for the page of th			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Tellabs Bēdford, Inc.			Bedford, TX			
Please check the appropriate assignce category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🔲 Government						
4a. The following fee(s) a	46	. Payment of Fec(s): (Plea	se first reapply any	previously paid issue fee s	shown above)	
Issue Fee	n small antity discount n	(comitted)	A check is enclosed.			
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			overpayment, to Depo-	sit Account Number	Cinclose an	extra copy of this form).
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Authorized Signature Charles 4. 136 Date 28 AUGUST 2007						
Typed or printed name			Registration No.			
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